

AIDS Brief

for sectoral planners
and managers

Civil Service



The HIV/AIDS epidemic is a global crisis that demands urgent attention and committed sustained action by alliances of individuals, organisations and sectors. The AIDS Brief series has been developed to support the conceptualisation and implementation of key sectoral responses.

In every country, Government should take the lead in understanding the HIV/AIDS epidemic, and in mounting an effective response to it. That response should aim not only to prevent new HIV infections, but also to mitigate the impact of the epidemic. In doing so, Government needs to embrace new roles and work with new partners. This AIDS Brief describes what the civil service can do as an employer as well as for and with its stakeholders and beneficiaries. The Brief covers both the actions that are generic to all Government Departments as well as those which are possible as a result of the functions and areas of influence of individual Departments.

BACKGROUND

Definition of the Civil Service

The civil service refers to Government employees who are appointed rather than elected.

Facts about the Civil Service

The civil service is a major field of employment in most countries. It offers a wide variety of positions that attract men and women from almost every occupation. The work of Government employees - whether national/federal, provincial/state or local - affects the health, welfare and security of all citizens. Amongst other things, Government employees represent the nation's interests in other countries, inspect food and drugs, collect taxes, maintain law and order, forecast the weather, protect parks and forests and administer the social security system. They may be highly trained



professionals or administrative staff. In the US they comprise about one-sixth of the nation's workers.

In different countries the separation of power is different - between the branches of Government and between the levels of Government - but all Governments rule and have the power to make and enforce laws. In the execution of these functions Government must work with multiple partners - business and labour, NGOs/CBOs, the media and communication organisations, the arts and cultural organisations, sporting and recreational bodies, the education and health sectors, religious groups, civil society and communities, politicians and traditional leaders, women's and youth organisations, tourism agencies, parastatals and academic and research institutions.

AIDS AND THE CIVIL SERVICE

The HIV/AIDS epidemic represents a significant challenge to the Governments of every country. The

impact of the epidemic will be felt both internally - within the workplace - and externally - within the communities

which Government and individual Departments represent and serve.

HIV/AIDS and the internal impact

The impact of HIV/AIDS within any workplace has certain common features – the civil service is no exception. These are reflected in Figure 1 below.

HIV/AIDS and the external impact

Within any country there will be communities and groups at greater risk of







HIV/AIDS than the general population. Where these groups are also the beneficiaries of individual Government Departments, there will be implications for the targets set by these Departments as well as for the policies and priorities set by Government as a whole.

For example, in a country where high rates of HIV infection are found amongst

young people, long-distance drivers, migrant and construction workers, people living in informal dwellings, refugees, military personnel and workers with sexually transmitted diseases, what are the implications of this for Departments such as Education, Transport, Agriculture, Defence, Housing, Home Affairs, Health, Labour, Welfare and so on?

Figure 1: Progression of cases and costs of HIV/AIDS in the civil service.

Adapted from *The Response of African Businesses to HIV/AIDS*.

| Progression of HIV/AIDS in the Workforce | Economic Impact of Individual Case | Economic Impact of All Cases |
|--|---|--|
| 1. Employee becomes infected with HIV  | <ul style="list-style-type: none"> ■ No costs to the Department at this stage | <ul style="list-style-type: none"> ■ No costs to the Department at this stage |
| 2. HIV/AIDS-related morbidity begins  | <ul style="list-style-type: none"> ■ Sick leave and other absenteeism increase ■ Work performance declines due to employee illness ■ Overtime and contractors' wages increase to compensate for absenteeism ■ Use of health/medical aid benefits increases ■ Employee requires attention of human resource and employee assistance personnel | <ul style="list-style-type: none"> ■ Overall productivity of workforce declines ■ Overall labour costs increase ■ Additional use of medical aid benefits causes premiums to increase ■ Managers begin to spend time and resources on HIV-related issues ■ HIV/AIDS interventions are designed and implemented |
| 3. Employee leaves workforce due to death, medical boarding, or voluntary resignation  | <ul style="list-style-type: none"> ■ Payout from death benefit or life insurance scheme is claimed ■ Pension benefits are claimed by employee or dependants ■ Other employees are absent to attend funeral ■ Funeral expenses are incurred ■ Loans, e.g. housing, are not repaid ■ Co-workers are demoralised by loss of colleague | <ul style="list-style-type: none"> ■ Payouts from pension fund cause employer and/or employee contributions to increase ■ Returns to training investments are reduced ■ Morale, discipline, and concentration of other employees are disrupted by frequent deaths of colleagues |
| 4. Department recruits a replacement employee  | <ul style="list-style-type: none"> ■ Department incurs costs of recruitment ■ Position is vacant until new employee is hired ■ Cost of overtime wages increases to compensate for vacant positions | <ul style="list-style-type: none"> ■ Additional recruiting staff and resources must be brought in ■ Wages for skilled (and possibly semi-skilled) employees increase as labour markets respond to the loss of workers |
| 5. Department trains the new employee  | <ul style="list-style-type: none"> ■ Department incurs costs of pre-employment training (induction, etc.) ■ Department incurs costs of in-service training to bring new employee up to level of old one ■ Salary is paid to employee during training | <ul style="list-style-type: none"> ■ Additional training staff and resources must be brought in |
| 6. New employee joins the workforce  | <ul style="list-style-type: none"> ■ Performance is low while new employee comes up to speed ■ Other employees spend time providing on-the-job training | <ul style="list-style-type: none"> ■ There is an overall reduction in the experience, skill, institutional memory, and performance of the workforce ■ Work unit productivity is disrupted due to increased staff turnover |

IMPACT CHECKLIST

Workplace (internal) HIV/AIDS impacts tend to be better understood than the external impacts on Departments. The impact checklist therefore focuses on the questions to be asked to enable a Department to describe the external impact of the epidemic on its services and beneficiaries.

- ✓ What is the existing capacity within the Department for an expanded response to HIV/AIDS? What is necessary to develop the required capacity?
- ✓ What policies, laws and/or regulations are barriers to an expanded response? How should these be amended to create an enabling environment for an

expanded response?

- ✓ What, if anything, has the Department been doing in the area of HIV/AIDS? What is working and needs to be continued or expanded? What is not working and needs a new approach or to be dropped? What has not been addressed at all?
- ✓ Are there factors related to the HIV/AIDS epidemic which will have either a direct or indirect impact on the functioning of the Department? If so, what are these factors and how can the Department prepare proactively for this?
- ✓ Are there factors related to the Department's role and the services for which it is responsible that contribute

to risk and vulnerability to HIV infection? If so, what are these factors and what can be done to reduce them?

- ✓ Who are the Department's beneficiaries? What is the risk profile of these beneficiaries?
- ✓ Who are the Department's potential partners? What is their potential to work in partnership with the Department on HIV/AIDS issues?

NOTE: In considering impact it is useful to describe it at different levels: impact in general, the epidemiological and demographic impact, the social impact (at the community, household and individual level) and the economic impact.

SECTORAL RESPONSE

In general, both Governments and communities have been slow to move from initial reactions of denial, silence, and discrimination to responses such as awareness, mobilisation and action. In many instances this has been blamed on:

- the absence of a common vision for an expanded response;
- poor understanding of the basic facts and issues relating to HIV/AIDS;
- a lack of commitment from leadership; and
- no effective co-ordination.

The results have tended to be narrow, health-focused responses, with Government as a whole abdicating its responsibilities by placing AIDS within the ambit of the public health sector. In recent years however this has been consistently challenged and, slowly, the concept of an expanded, multisectoral approach has been emerging.

What is a multisectoral or expanded response?

UNDP advocates a multisectoral approach that does not simply mean 'other sectors in a support role for a master plan, or other ministries finding ways to support a health ministry's response to HIV. Rather, it means all sectors determining

how the spread of the HIV epidemic is caused or contributed to by issues in their own sector's purview, and how the epidemic is likely to affect their own sector's plans, objectives and goals in the future'. UNAIDS describes an expanded response as follows: 'To match the expanding epidemic, we need an expanded response. Alongside increased and improved action in the health sphere, we need to do more about the underlying social and economic conditions that leave people few real options for protection. We need to strengthen the ability of individuals and communities to deal with AIDS as a new reality. And we need to incorporate AIDS issues into social and economic development.'

In effect this requires an appreciation of three fundamental concepts. Firstly, it means recognising the underlying factors (social, cultural, economic, political) which represent the context of the HIV/AIDS epidemic in any country. Secondly, it needs a common vision and consensus on what a country needs to do about its own unique epidemic. And finally it requires a process of recognising where, within this vision, there are opportunities and comparative advantages to make a difference, whether in terms of preventing new infections or mitigating the impact of

HIV/AIDS at the individual, family or societal level. In almost every instance, this means abandoning customary positions, being receptive to taking on non-traditional roles and responsibilities, and agreeing to new ways of co-operating with both existing as well as new partners.

A model with three components is proposed as the basis for any Government Department to develop its response. The first component is internal, focusing on its own employees; the second is external, focusing on external stakeholders, partners, constituencies and beneficiaries and the third is interdepartmental, generated in conjunction with other Departments. Each of these are expanded upon below.

Internal response

As Government is one of the largest employers in any country, each Department has a responsibility to develop a policy on HIV/AIDS and to initiate and sustain an HIV/AIDS programme for its staff. It furthermore has a responsibility to take the lead and serve as a role model for other employing bodies.

The following is a model policy developed for National Government Departments in South Africa:

DRAFT HIV/AIDS AND STD WORKPLACE POLICY FOR GOVERNMENT DEPARTMENTS

1. PREAMBLE

The Department of acknowledges the seriousness of the HIV/AIDS epidemic; seeks to minimise the social, economic and developmental consequences to the Department and its staff; and commits itself to providing resources and leadership to implement an HIV/AIDS and STD Programme.

2. PRINCIPLES

The Department affirms that:

- The policy shall be developed and implemented in consultation with staff and their representatives
- Staff living with HIV/AIDS have the same rights and obligations as all staff
- Staff living with HIV/AIDS shall be protected against discrimination
- HIV status shall not constitute a reason to preclude any person from employment
- No staff member shall be required to undergo HIV testing. Where testing is done at the instance of the employee, this will be with his/her informed consent and accompanied by counselling
- Confidentiality regarding the HIV status of any member of staff shall be maintained at all times

3. HIV/AIDS AND STD PROGRAMME IN THE WORKPLACE

3.1 CO-ORDINATION AND IMPLEMENTATION

The Department shall appoint an HIV/AIDS Programme Co-ordinator and Working Group to:

- Communicate the policy to all staff
- Implement, monitor and evaluate the Department's HIV/AIDS Programme
- Advise management regarding Programme implementation and progress
- Liaise with local AIDS Service Organisations and other resources in the community
- Create a supportive and non-discriminatory working environment

3.2 MANAGEMENT OF INFECTED EMPLOYEES

HIV/AIDS shall be treated in the same way as other disabling or terminal conditions.

3.3 PROGRAMME COMPONENTS

The HIV/AIDS Programme of the Department shall provide all staff access to:

- Information, education and communication activities including small media materials and peer education
- Barrier methods, particularly male condoms
- Health services for the appropriate management of STDs
- Treatment of opportunistic infections for infected staff
- Testing and counselling services
- Personal protective equipment for staff who may potentially be exposed to blood or blood products
- Support for both infected and affected staff

3.4 PLANNING

The Department shall conduct regular impact analyses in order to understand the evolving epidemic and how it will impact on the future of the Department as that relates to its structure, operations and functions.

3.5 BENEFITS

HIV infected staff are entitled to the same benefits as all staff.

3.6 BUDGET

The Department shall allocate an adequate budget to implement every aspect of its HIV/AIDS Programme.

4. INTERACTIONS WITH CIVIL SOCIETY

The Department shall endeavour to utilise all opportunities in which it interacts with civil society to contribute to the mission and objectives of the National HIV/AIDS and STD Programme.

5. INTERACTIONS WITHIN GOVERNMENT

The Department shall serve on the Interdepartmental Committee to ensure a uniform and concerted response by Government to the epidemic.



Internal workplace HIV/AIDS programme

In any Department an internal workplace HIV/AIDS programme should consist of four elements, namely co-ordination, management strategies, awareness and prevention activities, and care and support.

1. Co-ordination

An HIV/AIDS Co-ordinator should be identified and supported by an HIV/AIDS Task Group with representation from all sections within the Department. Jointly they have responsibility for developing, co-ordinating, implementing and monitoring the workplace policy and programme.

2. Management strategies

- Each Department should formulate a business plan or programme to implement the policy. The business plan should be developed in a consultative manner, for example in a workshop with key Departmental officials and invited AIDS experts
- Each Department's Senior Management Committee should be regularly updated about the epidemic and how the epidemic is likely to impact on its workforce, its functions and on the community it serves.
- Management should demonstrate leadership and support for the Department's HIV/AIDS programme.
- A review of all workplace policies and procedures should be undertaken to ensure that they comply with any legislation which has HIV/AIDS implications and which deals with discrimination.
- A regular needs assessment should be conducted which takes into account the risk profile of the workforce.
- Regular impact assessments should be conducted or commissioned to inform strategic planning, including an assessment of the costs of the epidemic.
- Periodic audits and reviews of the programme should take place.
- Data which are routinely collected should be analysed to monitor trends.
- The Department should identify the necessary human and financial

resources to develop, implement and sustain the programme.

3. Awareness and prevention activities

- Education is central to any comprehensive HIV/AIDS Programme - employees should have access to comprehensive, on-going education programmes including awareness activities and distribution of small media materials (on HIV/AIDS/STDs and TB). The source of information must be legitimate - peer educators are often the best sources of information on HIV/AIDS.



- Integration of HIV/AIDS educational activities should be encouraged, within the usual training and in-service programmes offered by the Department.
- The use of barrier methods, particularly male condoms, provides protection against STD and HIV infection - employees should have access to free condoms.
- Confidential HIV testing accompanied by pre- and post-test counselling provides an opportunity to review lifestyle options - employees should be encouraged to seek HIV testing and counselling.
- The presence of untreated STDs greatly increases the risk of acquiring HIV - early treatment for STDs should be promoted and supported.
- There is a very small risk of HIV transmission from blood in an accident situation - employees who render first aid should be supplied with personal protective equipment in accordance with Health and Safety legislation and should be trained in its use.

4. Care and Support

- Although there is no cure for HIV infection, there are medical interventions and lifestyle adjustments that can prolong the life of employees with HIV. Where feasible and practicable, such interventions should be offered to infected employees as part of the health care available to employees.
- Counselling is a valuable intervention to assist both persons infected with HIV, and those who are affected, to deal with issues and episodes related to HIV disease. The Department should endeavour to provide access to counselling for infected and affected employees either at work or in conjunction with community services.
- Non-discrimination and the protection of the rights of employees with HIV/AIDS are necessary to create an environment for an effective workplace HIV/AIDS programme. The Department should act decisively to prevent discrimination and to promote equal rights regardless of HIV status. Where an infected employee discloses his/her status, there should be measures in place to ensure protection.

External response

Government Departments, at different times and in many different contexts, have the potential to interact with almost every citizen, sometimes on a recurring basis. Many of these occasions represent ideal opportunities for advocacy around HIV/AIDS, for the creation of awareness, for distribution of materials and resources and for identifying affected individuals and families and linking them into care and support networks.

A Department's external response should aim to use all opportunities to reach stakeholders and constituent communities utilising all the channels which are available.

Examples of these opportunities are the following:

- Integrating HIV/AIDS activities such as awareness raising, and information and condom distribution into a Department's day-to-day contact with constituent communities.
- Integrating AIDS related issues into the public speeches and addresses of Ministers and other high profile Departmental officials.
- Demonstrating support for people living with HIV/AIDS and ensuring their meaningful participation in all Departmental-initiated activities.
- Distributing media materials and condoms from Government offices.

Interdepartmental initiatives

There are enormous benefits to be gained from collaborating with other Departments on cross-cutting issues such

as HIV/AIDS. A national interdepartmental forum should be created within which senior officials of all Government Departments can meet to develop appropriate responses to the HIV/AIDS epidemic by:

- reviewing the latest information on the epidemic



- examining the country's HIV/AIDS priorities to identify areas which require a multisectoral approach
- jointly planning and formulating strategies to achieve an optimal multisectoral approach and
- reviewing progress on a regular basis.

Policy development should be co-ordinated in order to create synergy within Government and an enabling environment for effective action. Resources, expertise and information can be shared as can training opportunities. To ensure that these opportunities and benefits extend downwards from the national level, interdepartmental structures and processes should be established at the provincial/state level.

ACTION CHECKLIST

Each Department has unique opportunities and responsibilities to implement relevant HIV/AIDS related policies and activities, thereby contributing to the national expanded AIDS effort. The Action Checklist consists of examples of policies/activities/interventions that individual

Departments may undertake. The list is not exhaustive: rather the intention is to demonstrate the vast range of opportunities which exist for the civil service to contribute to an expanded multisectoral response to HIV/AIDS. In reviewing whether or not these are relevant each should be scrutinised in terms of:

- ✓ Whether or not the activity would be supported by decision-makers.
- ✓ If there would be funds and/or resources to support the activity.
- ✓ Are there the necessary alliances for the activity to work?
- ✓ Does the activity provide opportunities for people to become involved?

| DEPARTMENT | POLICY/ACTIVITY/INTERVENTION |
|---------------------------------------|--|
| Agriculture | <ul style="list-style-type: none"> ✓ Initiate outreach on HIV/AIDS to rural communities ✓ Support poverty relief and food security programmes ✓ Facilitate interventions to support rural families, including those catering for orphans and those that promote the empowerment of rural women ✓ Involve agricultural extension officers in HIV/AIDS activities ✓ Encourage commercial farmers' organisations to develop responses to HIV/AIDS |
| Arts, Culture, Science and Technology | <ul style="list-style-type: none"> ✓ Facilitate the involvement of arts and cultural organisations and promote the inclusion of HIV/AIDS issues in arts and cultural activities such as exhibitions, theatre, music etc. |
| Correctional Services | <ul style="list-style-type: none"> ✓ Include HIV/AIDS in rehabilitation and education programmes for offenders and their families ✓ Review and improve access to information and condoms for prisoners |
| Defence | <ul style="list-style-type: none"> ✓ Where possible and practicable, deploy members of the armed forces in close proximity to their families ✓ Expand HIV/AIDS interventions to communities surrounding military bases |
| Education | <ul style="list-style-type: none"> ✓ Ensure that a life skills programme is implemented for youth in school ✓ Expand the life skills programme to youth out-of-school ✓ Facilitate access to condoms for youth ✓ Provide information, education and condoms to students at tertiary institutions ✓ Involve students at tertiary institutions in HIV/AIDS related research and interventions ✓ Consider fee subsidies/exemptions to enable orphans to attend school |

| DEPARTMENT | POLICY/ACTIVITY/INTERVENTION |
|---------------------------------------|--|
| Environment | <ul style="list-style-type: none"> ✓ Use environment awareness days to raise awareness about HIV/AIDS ✓ Include HIV/AIDS in rural outreach activities |
| Finance | <ul style="list-style-type: none"> ✓ Model how HIV/AIDS will influence overall demography and the economy and facilitate the integration of this into the financial planning of all Government Departments ✓ Mobilise resources for HIV/AIDS programmes from national and international financial institutions and agencies ✓ Approve budgets for HIV/AIDS related interventions in all Government Departments ✓ Review regulations to enable Government Departments to fund community based HIV/AIDS projects ✓ Work with the insurance industry to address the restrictions on HIV infected persons applying for life assurance |
| Foreign Affairs | <ul style="list-style-type: none"> ✓ Mobilise international resources ✓ Facilitate international communication around HIV/AIDS issues |
| Health | <ul style="list-style-type: none"> ✓ Integrate HIV/AIDS into all health promotion activities and services ✓ Develop innovative methods of providing care to those infected and affected |
| Home/Internal Affairs | <ul style="list-style-type: none"> ✓ Utilise contact with the public at Home Affairs offices to raise awareness, provide information and access to condoms ✓ Provide access to information and condoms through contacts in refugee settlements and at border posts |
| Housing and Public Works | <ul style="list-style-type: none"> ✓ Print HIV related messages on application forms for subsidised housing ✓ Design interventions that reduce the destabilisation of family life in all public works projects ✓ Support sub-contractors to develop workplace policies and programmes ✓ Incorporate an understanding of the projected impact of the epidemic in all planning for housing and public works projects |
| Justice | <ul style="list-style-type: none"> ✓ Provide HIV/AIDS information at courts ✓ Provide referral information for sexual abuse cases |
| Labour | <ul style="list-style-type: none"> ✓ Provide HIV/AIDS information to people collecting unemployment insurance ✓ Develop and popularise non-discriminatory workplace policies ✓ Promote occupational health and safety protocols to minimise the risk of HIV transmission in the workplace ✓ Work with employer and worker/trade union organisations to develop workplace HIV/AIDS policies and programmes ✓ Consider a system of incentives for companies meeting certain standards in terms of workplace HIV/AIDS policies and programmes |
| Land Affairs | <ul style="list-style-type: none"> ✓ Interact with constituent communities and facilitate distribution of information and materials |
| Mineral and Energy Affairs | <ul style="list-style-type: none"> ✓ Promote workplace programmes in the mining sector ✓ Support activities which aim to reduce risk factors such as migrancy |
| Posts and Telecommunications | <ul style="list-style-type: none"> ✓ Utilise electronic mass media for HIV/AIDS awareness ✓ Piggyback HIV/AIDS information and messages on other communications ✓ Support HIV/AIDS information toll-free lines |
| President's/Deputy President's Office | <ul style="list-style-type: none"> ✓ Ensure a high level of political commitment to HIV/AIDS ✓ Include HIV/AIDS messages in all President's/Deputy President's speeches ✓ Co-ordinate the interdepartmental HIV/AIDS response ✓ Integrate HIV/AIDS issues into policies of special commissions and offices such as Gender and Women, Youth and Children, Disability etc. ✓ Mobilise national and international resources for HIV/AIDS |
| Provincial/State/Local Government | <ul style="list-style-type: none"> ✓ Advocate for Provincial/State and Local Government to develop HIV/AIDS policies and programmes ✓ Integrate HIV/AIDS into economic and social development projects ✓ Utilise contact with marginalised groups to introduce HIV/AIDS interventions |

| DEPARTMENT | POLICY/ACTIVITY/INTERVENTION |
|-----------------------------------|---|
| Public Enterprises | ✓ Facilitate the development of appropriate policies in parastatal organisations |
| Public Service and Administration | <ul style="list-style-type: none"> ✓ Review all staff policies and procedures to ensure non-discrimination in respect of HIV/AIDS in the civil service ✓ Develop HIV/AIDS-appropriate conditions of services and employee benefits for the civil service |
| Revenue Services | ✓ Utilise general correspondence to taxpayers to distribute HIV/AIDS information |
| Safety and Security | <ul style="list-style-type: none"> ✓ Train police services to deal with sexual violence and abuse ✓ Expand on existing programmes that aim to stabilise communities ✓ Improve counselling and bereavement services |
| Sport and Recreation | <ul style="list-style-type: none"> ✓ Incorporate HIV/AIDS prevention activities into youth sports development programmes ✓ Distribute HIV/AIDS awareness materials at sporting events |
| Tourism | ✓ Facilitate access to HIV prevention, information and condoms via tourism agencies and the hospitality industry |
| Trade and Industry | ✓ Consider preferential import conditions to improve access to HIV/AIDS drugs and male and female condoms |
| Transport | ✓ Work with partners to introduce HIV/AIDS interventions along high HIV transmission routes |
| Water Affairs | ✓ Expand HIV/AIDS outreach to rural communities and provide HIV/AIDS information through water projects |
| Welfare | <ul style="list-style-type: none"> ✓ Develop strategies and capacity to deal with AIDS orphans, abandoned babies and people who become destitute as a result of being affected by HIV/AIDS ✓ Pursue policy issues related to sex work (to reduce situations of risk) ✓ Use opportunities created when people congregate to apply for or collect grants to disseminate HIV/AIDS information ✓ Integrate HIV/AIDS into all aspects of social work |

SUMMARY

Government has a leading role to play in defining a country's response to HIV/AIDS. Its strategies should be developed in the context of sustainable human development and its policies

and planning should, at all times, take account of HIV/AIDS. Individual Departments should understand the profile of the epidemic within their specific areas of influence and utilise all

opportunities to contribute to HIV/AIDS prevention and mitigation efforts - within the overall vision for the country's response.

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